

COUNTY OF LOS ANGELES

MARVIN J. SOUTHARD, D.S.W.
Director

ROBIN KAY, Ph.D.
Acting Chief Deputy Director

RODERICK SHANER, M.D.
Medical Director



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DEPARTMENT OF MENTAL HEALTH

<http://dmh.lacounty.info>

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

Reply To: (213) 738-4601
Fax: (213) 386-1297

January 1, 2008

TO: Each Supervisor

FROM: Marvin J. Southard, D.S.W.
Director of Mental Health

SUBJECT: **MENTAL HEALTH SERVICES ACT SKID ROW SERVICES – QUARTERLY REPORT January 2008**

This letter is to provide a status report regarding new programs in the Skid Row area in response to your Board's April 3, 2007 motion instructing the Department of Mental Health (DMH) to take several actions related to efforts to reduce homelessness in Skid Row in coordination with communities outside of Skid Row.

Your Board instructed DMH to provide a quarterly progress report on the Mental Health Services Act (MHSA) community-based services and supports planned for Skid Row including:

- Progress on implementation of programs planned for Skid Row, including Service Area Navigator Teams, Crisis Resolution Services, Full Service Partnerships, Wellness Centers, and the development of housing options;
- Tracking outcome measures for MHSA funded programs in the Skid Row area; and
- Tracking the number of clients who refuse medical treatment for alcohol and drug abuse.

We will continue to provide quarterly reports, as instructed.

MJS:TB:MM:LAH:oc

Attachment

c: Sachi A. Hami, Executive Officer

"To Enrich Lives Through Effective And Caring Service"

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
MENTAL HEALTH SERVICES ACT
SKID ROW SERVICES PROGRESS REPORT

January 1, 2008

On April 3, 2007, the Board of Supervisors approved the Department of Mental Health's (DMH) request to utilize Mental Health Services Act (MHSA) funding to implement the following programs:

- Crisis Resolution Service (CRS) at the Downtown Mental Health Center (DMHC) that will provide short term, intensive, mental health and supportive services, including comprehensive assessment.
- Skid Row Management Team (SRMT) to provide overall administration, management and coordination of existing services, and the development of new services in collaboration with local stakeholder planning groups.
- Client Run Contracted Wellness Center for the Skid Row area to serve individuals who no longer require intensive mental health services. The Department issued a Request for Services in October 2007. A Bidder's Conference was held on October 30, 2007. DMH will return to the Board when a contractor has been selected.
- Directly Operated Wellness Center in the Skid Row area is scheduled to be implemented during Fiscal Year 2007-2008. This program will serve clients that have reached a higher level of wellness and recovery and require additional, ongoing supports to sustain those gains, and to further integrate into the community.

DMH MHSA funded services in the Skid Row area serve individuals in need of integrated mental health services and supports. New services provided also include the Downtown Mental Health Center Full Service Partnership (FSP) program and the Service Area IV Navigator Team (SANT).

Full Service Partnerships

The DMHC FSP program, implemented in December 2006, will serve a maximum of 180 consumers at any given time. During the past quarter, the DMHC FSP program had 92 individuals enrolled. We anticipate that all slots will be filled by the end of this fiscal year depending on the progress of Project 50, and other special collaborative projects in the Skid Row area. The outcomes described below continue to indicate the DMHC FSP program's success in its efforts to reduce homelessness, incarcerations and acute psychiatric hospitalizations.

- 93% decrease in days of homelessness in the year prior to enrollment compared with the period since enrollment in the program;
- 70% decrease in days of incarceration in the year prior to enrollment compared with the period since enrollment in the program
- 24% decrease in the days of hospitalization for psychiatric reasons in the year prior to enrollment compared with the period since enrollment in the program

The outcomes to date continue to reflect the effectiveness of the Assertive Community Treatment (ACT) approach employed by the DMHC FSP Team with a consumer population that had previously faced challenges in accessing and engaging in treatment programs. These results demonstrate progress in wellness and recovery efforts, as well as significant savings to multiple County department budgets.

Service Area Navigator Teams

The SANT in Service Area (SA) 4, which includes DMHC and the Skid Row area, assists individuals of all ages in need of mental health and other supportive services to access the appropriate level and type of services. SANT has been developing linkages with various community-based organizations in order to refer individuals in the Skid Row area to an array of services. SANT services include:

- Outreach and engagement for individuals, families and community based agencies to enhance access to mental health services
- Establishing linkages with community providers, including housing resources, in order to serve clients and residents from the Skid Row and larger (SA 4) region.
- Participation in SA Impact Units that enroll individuals into mental health programs such as FSP's, Assertive Community Treatment (ACT), and Field Capable Clinical Services (FCCS), or provide linkage to other community-based services

During the last quarter, SANT has:

- Received over 116 referrals for adults and 70 young adults from throughout the SA 4 for outreach, engagement and enrollment into FSP, Adult Targeted Case Management Services (ATCMS), ACT, or other intensive treatment programs.

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- Received 22 Referrals from Skid Row Area ATCMS, or ACT, and Specialized Housing (this number includes the data from the Housing Navigators).
- Enrolled approximately 76 individuals living in the Skid Row area in a FSP, ACT, or other programs.
- Enrolled 43 Transitional Aged Youth (TAY, ages 16 thru 25 years) in FSP.

Outcomes include:

- 28 Adults clients enrolled in either FSP's or other intensive programs have been successfully housed in permanent housing/long-term housing with the assistance of the program or are applying for permanent/long-term housing. Mental health staff assist in the completion of housing applications, help people to enter shelter care until permanent/long-term housing is found, assist in obtaining benefits to pay for housing and assist in identifying housing locations.
- 16 individuals referred for services have refused services or have been determined to need other levels of care or types of services.
- 46 individuals residing in the Skid Row area are currently receiving outreach and engagement services.
- FSP referrals that did not meet FSP criteria and were referred to other programs include 3 to Adult Targeted Case Management Services (ATCMS), and 11 to Assertive Community Treatment (ACT).

Housing Trust Fund

A Countywide Housing Trust Fund of \$11.5 million has been established to support the development of new permanent supportive housing for people with psychiatric disabilities. The Housing Trust Fund will provide funds for on-site supportive services and/or project-based operating subsidies for supportive housing projects and scattered site supportive services for shared housing projects. The DMH Director has appointed a Housing Trust Fund Advisory Board which serves as an official advisory body to DMH on all MHSA housing initiatives. In May, 2007 this body finalized its funding criteria and principles recommendations to DMH which will be used to inform and assist the Department in making decisions. The Department has completed a Housing Trust Fund Request for Proposals which is projected to be released in the January 2008.

details have been listed on the State Department of Mental Health's website at <http://www.dmh.ca.gov/mhsa/Housing>.

Crisis Resolution Services

CRS is a short term (60 days or less), outpatient based, intensive, clinical and case management program. The program objective is to address and eliminate barriers to mental health stabilization for new and returning (disengaged) clients. Services include but are not limited to: linkage to emergency and permanent housing, medical and dental service referrals, benefits establishment, intensive case management, psychiatric services and medication, short-term psychotherapy and crisis intervention.

CRS was implemented on October 11, 2007. The program currently provides services two days per week. CRS will expand to three days per week in January 2008. Recruitment of clinical staff for the CRS has been challenging, but currently, 17 of the 29 allotted CRS positions have been filled. As the staff count grows, additional days will be added until full implementation of five days weekly is realized.

Since implementation, CRS has:

- Enrolled an average of 9 new clients daily;
- Reduced average wait time for new clients to see a psychiatrist by 75% (from 20 to 5 days - clients with emergent needs are seen by an MD same day);
- Reduced attrition rate among newly enrolled clients by 45%; and
- Housed 90% of homeless clients presenting for services on intake date (initially in contracted DMH shelters awaiting completion and approval of Section 8 application).

Favorable outcomes can be attributed to the intensive case management services applied to CRS clients that include frequent follow-up appointments for mental health services, and employing a *whatever-it-takes* approach to addressing clients' ancillary needs such as homelessness which historically has often prevented clients from making mental health treatment a priority.

Skid Row Management Team

DMH has finalized the hiring of the SRMT during this past quarter. In collaboration with CEO Real Estate Division, the SRMT has located potential office space in the Skid Row area. The potential site is midway between the Downtown Mental Health Center clinic site on Maple Avenue Street and the new DMHC FSP site, and within one block of Union Rescue Mission, Midnight Mission, and the future home of Downtown Women's Center, and the proposed Leavy Center project.

Additional activities have included:

- Collaboration with other DMH programs to develop and issue the Client Run Wellness Center Request for Services process for Skid Row;
- Implementation of DMHC CRS program;
- Successful State Medi-Cal certification of the new DMHC Full Service Partnership site;
- Collaboration with SPA IV District Chief for State Medi-Cal certification of LAMP, Inc. as a outpatient mental health clinic;
- Monthly meetings with local Skid Row area stakeholder groups: Skid Row Homeless Healthcare Initiative, and Skid Row Community Advisory Board;
- Coordination with DMH SPA IV District Chief to facilitate the transfer of responsibility for DMH contract agencies in Skid Row to SRMT.

In addition, SRMT, and CRS staff participated in the early stage implementation of Project 50, an effort to identify and provide permanent housing and other services to high risk, medically vulnerable persons living on the streets of Skid Row. SRMT leadership will continue its efforts to work collaboratively with area stakeholders to enhance services and supports in Skid Row.

Summary

In summary, during this quarter, DMH made additional progress in increasing intensive community based resources in Skid Row that are focused on reducing homelessness and breaking the cycle of costly emergency outpatient care and incarceration while promoting recovery and community reintegration for individuals with mental illness. DMH will continue to provide progress reports as requested.